

Table 5.1 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Age and by Gender and Age, 1997 (1 of 2)

Community-Only Residents¹

Indicator of Access to Care ²	Total	All Medicare Beneficiaries				Male					Female				
		< 65	65 - 74	75 - 84	85 +	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,024	4,607	18,431	10,973	3,014	2,736	8,381	4,327	1,023	16,466	1,870	10,050	6,647	1,991	20,558
	147	94	143	121	70	73	110	85	37	127	55	115	112	55	144
Beneficiaries as a Percentage of Column Total Access to Care															
Usual Source of Care															
None ³	6.27	7.85	6.59	5.37	5.20	8.99	7.77	6.22	4.82	7.38	6.16	5.60	4.81	5.40	5.37
	0.29	0.72	0.41	0.44	0.66	1.00	0.65	0.72	1.01	0.44	0.93	0.53	0.47	0.74	0.34
Doctor's office	71.64	63.16	70.23	75.61	78.55	61.37	67.60	73.06	79.20	68.74	65.81	72.42	77.28	78.21	73.97
	1.06	1.44	1.08	1.38	1.66	2.05	1.32	1.55	2.34	1.18	1.86	1.20	1.52	1.79	1.13
Doctor's clinic	7.97	8.98	8.43	7.34	5.98	7.21	8.37	7.13	5.86	7.69	11.59	8.49	7.48	6.04	8.20
	0.94	1.18	0.83	1.19	1.20	1.32	0.89	1.34	1.47	0.99	1.42	0.91	1.20	1.21	0.95
HMO ⁴	7.38	4.54	8.69	6.91	5.34	4.48	8.42	7.04	5.64	7.23	4.62	8.91	6.83	5.19	7.49
	0.31	0.57	0.51	0.48	0.61	0.74	0.68	0.69	0.97	0.45	0.99	0.65	0.63	0.75	0.41
Hospital OPD/ER ⁵	2.79	6.16	2.68	1.87	1.79	6.06	2.49	1.99	1.25	2.87	6.30	2.83	1.79	2.06	2.73
	0.21	0.72	0.27	0.25	0.37	0.88	0.36	0.39	0.47	0.27	1.07	0.37	0.30	0.50	0.27
Other clinic/health center	3.95	9.32	3.39	2.90	3.15	11.88	5.35	4.56	3.23	6.09	5.51	1.75	1.81	3.10	2.23
	0.21	0.93	0.28	0.25	0.50	1.44	0.52	0.47	0.85	0.42	1.01	0.31	0.26	0.65	0.20
Difficulty Obtaining Care															
Yes	3.14	8.64	2.58	2.11	2.02	9.16	2.17	1.77	1.03	3.15	7.87	2.93	2.33	2.54	3.14
	0.18	0.77	0.24	0.22	0.43	1.03	0.32	0.36	0.47	0.25	1.27	0.37	0.29	0.60	0.25
No	96.86	91.36	97.42	97.89	97.98	90.84	97.83	98.23	98.97	96.85	92.13	97.07	97.67	97.46	96.86
	0.18	0.77	0.24	0.22	0.43	1.03	0.32	0.36	0.47	0.25	1.27	0.37	0.29	0.60	0.25
Delayed Care Due to Cost															
Yes	6.86	21.31	5.55	4.08	3.28	21.18	4.04	3.25	2.52	6.57	21.50	6.81	4.62	3.68	7.10
	0.25	1.16	0.32	0.35	0.56	1.63	0.43	0.52	0.76	0.41	1.74	0.55	0.46	0.70	0.35
No	93.14	78.69	94.45	95.92	96.72	78.82	95.96	96.75	97.48	93.43	78.50	93.19	95.38	96.32	92.90
	0.25	1.16	0.32	0.35	0.56	1.63	0.43	0.52	0.76	0.41	1.74	0.55	0.46	0.70	0.35

Table 5.1 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Age and by Gender and Age, 1997 (2 of 2)

Community-Only Residents¹

Indicator of Access to Care ²	Total	All Medicare Beneficiaries				Male					Female				
		< 65	65 - 74	75 - 84	85 +	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,024	4,607	18,431	10,973	3,014	2,736	8,381	4,327	1,023	16,466	1,870	10,050	6,647	1,991	20,558
	<i>147</i>	<i>94</i>	<i>143</i>	<i>121</i>	<i>70</i>	<i>73</i>	<i>110</i>	<i>85</i>	<i>37</i>	<i>127</i>	<i>55</i>	<i>115</i>	<i>112</i>	<i>55</i>	<i>144</i>
Beneficiaries as a Percentage of Column Total															
Continuity of Care															
Length of Association with Usual Source of Care															
No usual source ³	6.30	7.92	6.60	5.40	5.30	9.08	7.80	6.25	4.91	7.42	6.20	5.60	4.85	5.50	5.40
	<i>0.29</i>	<i>0.72</i>	<i>0.41</i>	<i>0.44</i>	<i>0.67</i>	<i>1.01</i>	<i>0.66</i>	<i>0.72</i>	<i>1.04</i>	<i>0.44</i>	<i>0.93</i>	<i>0.53</i>	<i>0.47</i>	<i>0.75</i>	<i>0.35</i>
Less than 1 year	10.32	11.19	10.70	9.35	10.20	11.13	10.01	8.59	11.36	9.90	11.29	11.28	9.85	9.60	10.65
	<i>0.36</i>	<i>0.92</i>	<i>0.56</i>	<i>0.56</i>	<i>0.78</i>	<i>1.24</i>	<i>0.81</i>	<i>0.81</i>	<i>1.47</i>	<i>0.52</i>	<i>1.15</i>	<i>0.73</i>	<i>0.71</i>	<i>1.04</i>	<i>0.49</i>
1 to less than 3 years	18.81	23.59	18.92	17.32	16.42	23.72	17.69	17.77	13.91	18.46	23.39	19.94	17.03	17.72	19.09
	<i>0.48</i>	<i>1.38</i>	<i>0.72</i>	<i>0.66</i>	<i>1.03</i>	<i>1.87</i>	<i>0.97</i>	<i>0.97</i>	<i>1.58</i>	<i>0.71</i>	<i>1.98</i>	<i>0.96</i>	<i>0.83</i>	<i>1.22</i>	<i>0.58</i>
3 to less than 5 years	15.94	18.45	15.75	15.24	15.91	18.50	15.45	14.24	17.26	15.74	18.37	15.99	15.89	15.21	16.10
	<i>0.39</i>	<i>1.16</i>	<i>0.58</i>	<i>0.61</i>	<i>0.98</i>	<i>1.50</i>	<i>0.79</i>	<i>0.98</i>	<i>1.88</i>	<i>0.53</i>	<i>1.77</i>	<i>0.85</i>	<i>0.86</i>	<i>1.16</i>	<i>0.53</i>
5 years or more	48.63	38.85	48.03	52.69	52.17	37.57	49.06	53.16	52.57	48.47	40.74	47.18	52.39	51.97	48.75
	<i>0.66</i>	<i>1.17</i>	<i>0.94</i>	<i>0.90</i>	<i>1.63</i>	<i>1.57</i>	<i>1.35</i>	<i>1.45</i>	<i>2.44</i>	<i>0.97</i>	<i>2.03</i>	<i>1.09</i>	<i>1.00</i>	<i>1.80</i>	<i>0.72</i>

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Responses for sample persons not interviewed in Round 19 (i.e., the 1997 Access to Care Public Use File) were taken from their Round 16 interview (i.e., the 1996 Access to Care Public Use File) or from their Round 22 interview (i.e., the 1998 Access to Care Public Use File).
- 3 The percentage of responses for *none* under *usual source of care* differs from the percentage of responses for *no usual source* under *length of association with usual source of care* because of differences in the number of missing responses for the two variables. See the entry *missing values* in Appendix B for further explanation.
- 4 *HMO* stands for Health Maintenance Organization.
- 5 *OPD* stands for Outpatient Department; *ER* stands for Emergency Room.

Table 5.2 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Age and by Gender and Age, 1997 (1 of 2)

Community-Only Residents¹

Measure of Satisfaction ²	Total	All Medicare Beneficiaries				Male				Total	Female				Total
		< 65	65 - 74	75 - 84	85 +	< 65	65 - 74	75 - 84	85 +		< 65	65 - 74	75 - 84	85 +	
Beneficiaries (in 000s)	37,024	4,607	18,431	10,973	3,014	2,736	8,381	4,327	1,023	16,466	1,870	10,050	6,647	1,991	20,558
	147	94	143	121	70	73	110	85	37	127	55	115	112	55	144
Beneficiaries as a Percentage of Column Total³															
Quality of Care															
General Care															
Very satisfied	28.62	20.57	31.92	27.83	23.41	20.59	31.78	28.85	25.36	28.77	20.55	32.03	27.16	22.39	28.50
	0.68	1.16	0.92	0.92	1.21	1.49	1.41	1.18	2.11	0.95	1.88	1.00	1.09	1.41	0.75
(Very) Unsatisfied	3.52	6.58	3.05	2.96	3.90	6.77	2.95	2.54	3.66	3.51	6.30	3.14	3.23	4.02	3.53
	0.18	0.78	0.27	0.29	0.62	1.11	0.43	0.46	1.16	0.31	1.08	0.35	0.35	0.75	0.23
Follow-up Care															
Very satisfied	17.12	16.59	18.39	16.44	12.57	15.58	19.26	16.31	14.10	17.55	18.11	17.66	16.53	11.78	16.77
	0.53	1.14	0.71	0.75	0.87	1.26	1.06	1.03	1.69	0.72	1.75	0.80	0.85	1.03	0.55
(Very) Unsatisfied	2.86	5.35	2.51	2.36	3.03	5.89	2.23	1.74	3.12	2.76	4.54	2.74	2.77	2.98	2.94
	0.17	0.60	0.25	0.24	0.51	0.87	0.39	0.32	0.90	0.28	0.82	0.32	0.34	0.60	0.20
Access/Coordination of Care															
Availability															
Very satisfied	10.37	10.76	11.22	9.10	9.22	10.47	12.50	9.20	9.65	11.12	11.18	10.16	9.03	9.00	9.77
	0.44	1.02	0.64	0.54	0.68	1.29	0.98	0.86	1.41	0.64	1.57	0.67	0.65	0.86	0.48
(Very) Unsatisfied	2.75	6.78	2.19	2.16	2.27	6.60	2.20	2.39	1.42	2.93	7.05	2.17	2.01	2.71	2.61
	0.20	0.67	0.27	0.23	0.41	0.73	0.34	0.36	0.57	0.27	1.25	0.33	0.28	0.54	0.24
Ease of Access to Doctor															
Very satisfied	18.14	12.72	21.21	16.35	14.01	12.05	22.42	17.01	16.63	18.93	13.72	20.21	15.93	12.66	17.51
	0.60	1.04	0.78	0.81	0.84	1.22	1.19	1.09	1.73	0.81	1.62	0.87	1.00	1.06	0.65
(Very) Unsatisfied	5.03	9.93	3.51	4.94	7.37	9.60	3.00	4.16	6.07	4.58	10.41	3.93	5.45	8.04	5.40
	0.26	0.88	0.32	0.34	0.73	1.07	0.39	0.55	1.09	0.33	1.34	0.46	0.48	0.94	0.33
Can Obtain Care in Same Location															
Very satisfied	14.18	13.34	15.52	13.21	10.78	12.24	16.40	13.01	10.91	14.48	14.96	14.79	13.34	10.71	13.94
	0.55	1.17	0.68	0.74	1.01	1.16	0.92	0.96	1.59	0.65	1.94	0.77	0.86	1.14	0.63
(Very) Unsatisfied	4.18	7.84	3.84	3.30	3.98	7.21	3.44	3.66	3.97	4.15	8.78	4.18	3.06	3.99	4.21
	0.26	0.73	0.33	0.36	0.57	1.02	0.47	0.59	1.08	0.40	1.06	0.55	0.38	0.70	0.32

Table 5.2 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Age and by Gender and Age, 1997 (2 of 2)

Community-Only Residents¹

Measure of Satisfaction ²	Total	All Medicare Beneficiaries				Male				Total	Female				Total
		< 65	65 - 74	75 - 84	85 +	< 65	65 - 74	75 - 84	85 +		< 65	65 - 74	75 - 84	85 +	
Beneficiaries (in 000s)	37,024	4,607	18,431	10,973	3,014	2,736	8,381	4,327	1,023	16,466	1,870	10,050	6,647	1,991	20,558
	<i>147</i>	<i>94</i>	<i>143</i>	<i>121</i>	<i>70</i>	<i>73</i>	<i>110</i>	<i>85</i>	<i>37</i>	<i>127</i>	<i>55</i>	<i>115</i>	<i>112</i>	<i>55</i>	<i>144</i>
Beneficiaries as a Percentage of Column Total³															
Relationship with Primary Doctor															
Information from Doctor															
Very satisfied	17.04	15.17	19.13	15.59	12.30	14.14	18.69	15.39	12.40	16.69	16.69	19.49	15.72	12.25	17.32
	<i>0.58</i>	<i>1.13</i>	<i>0.75</i>	<i>0.75</i>	<i>0.97</i>	<i>1.32</i>	<i>1.07</i>	<i>1.07</i>	<i>1.59</i>	<i>0.75</i>	<i>1.70</i>	<i>0.94</i>	<i>0.88</i>	<i>1.22</i>	<i>0.61</i>
(Very) Unsatisfied	5.08	7.81	4.35	5.10	5.30	8.15	4.23	4.69	6.01	5.11	7.31	4.45	5.37	4.94	5.05
	<i>0.24</i>	<i>0.75</i>	<i>0.35</i>	<i>0.43</i>	<i>0.65</i>	<i>0.96</i>	<i>0.48</i>	<i>0.56</i>	<i>1.29</i>	<i>0.32</i>	<i>1.10</i>	<i>0.48</i>	<i>0.54</i>	<i>0.73</i>	<i>0.32</i>
Doctor's Concern for Overall Health															
Very satisfied	18.98	17.62	20.63	17.88	14.96	17.38	20.35	18.08	15.94	18.99	17.99	20.86	17.75	14.46	18.98
	<i>0.57</i>	<i>1.16</i>	<i>0.73</i>	<i>0.78</i>	<i>1.03</i>	<i>1.39</i>	<i>1.07</i>	<i>1.11</i>	<i>1.81</i>	<i>0.71</i>	<i>1.81</i>	<i>0.78</i>	<i>0.90</i>	<i>1.15</i>	<i>0.61</i>
(Very) Unsatisfied	4.52	6.79	4.11	4.31	4.37	7.00	3.83	3.89	5.75	4.49	6.49	4.34	4.59	3.66	4.55
	<i>0.20</i>	<i>0.71</i>	<i>0.30</i>	<i>0.36</i>	<i>0.61</i>	<i>0.92</i>	<i>0.44</i>	<i>0.54</i>	<i>1.22</i>	<i>0.33</i>	<i>0.92</i>	<i>0.42</i>	<i>0.50</i>	<i>0.75</i>	<i>0.28</i>
Cost of Care															
Cost															
Very satisfied	16.46	13.33	18.07	15.81	13.64	11.52	18.62	17.25	16.92	16.99	16.00	17.61	14.87	11.94	16.03
	<i>0.48</i>	<i>1.07</i>	<i>0.68</i>	<i>0.69</i>	<i>0.92</i>	<i>1.31</i>	<i>1.09</i>	<i>1.09</i>	<i>1.63</i>	<i>0.73</i>	<i>1.58</i>	<i>0.70</i>	<i>0.75</i>	<i>1.17</i>	<i>0.50</i>
(Very) Unsatisfied	11.03	19.29	10.29	9.33	9.27	19.77	9.26	8.08	9.14	10.67	18.58	11.16	10.14	9.33	11.31
	<i>0.45</i>	<i>1.20</i>	<i>0.65</i>	<i>0.45</i>	<i>0.92</i>	<i>1.65</i>	<i>0.76</i>	<i>0.70</i>	<i>1.31</i>	<i>0.55</i>	<i>1.50</i>	<i>0.95</i>	<i>0.60</i>	<i>1.09</i>	<i>0.59</i>

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Responses for sample persons not interviewed in Round 19 (i.e., the 1997 Access to Care Public Use File) were taken from their Round 16 interview (i.e., the 1996 Access to Care Public Use File) or from their Round 22 interview (i.e., the 1998 Access to Care Public Use File).
- 3 Column percentages do not sum to 100 percent because the responses of *satisfied* and *no experience* are excluded from the table for all satisfaction variables.

Table 5.3 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 1997 (1 of 2)

Community-Only Residents¹

Indicator of Access to Care ²	Total ³	White non-Hispanic					Black non-Hispanic					Hispanic				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,024	3,109	15,161	9,497	2,582	30,349	808	1,442	731	224	3,206	556	1,224	529	153	2,462
	147	94	158	121	65	203	40	58	36	16	77	48	96	54	23	163
Beneficiaries as a Percentage of Column Total Access to Care																
Usual Source of Care																
None ⁴	6.27	7.91	6.19	4.82	4.75	5.81	6.78	9.14	4.98	6.37	7.40	5.92	7.73	14.96	11.37	9.12
	0.29	0.92	0.43	0.42	0.66	0.31	1.18	1.65	1.24	2.33	0.84	2.30	1.60	3.21	6.42	1.29
Doctor's office	71.64	67.37	72.82	77.46	80.49	74.38	56.56	58.35	67.86	68.78	60.82	50.17	58.68	56.11	61.07	56.40
	1.06	2.13	1.18	1.50	1.82	1.21	3.44	3.04	2.86	4.12	2.00	3.77	3.45	3.75	8.56	2.12
Doctor's clinic	7.97	8.93	9.05	7.55	6.54	8.36	9.17	4.63	7.29	3.38	6.29	8.22	3.81	4.04	2.57	4.75
	0.94	1.59	0.93	1.33	1.40	1.07	2.09	1.53	1.40	1.49	1.09	2.87	1.26	1.67	1.39	0.97
HMO ⁵	7.38	4.08	7.84	6.66	5.14	6.86	3.30	8.18	3.60	5.41	5.72	9.74	17.20	15.96	7.76	14.69
	0.31	0.69	0.49	0.53	0.63	0.33	1.37	1.37	1.29	2.27	0.74	2.72	2.94	2.80	3.65	2.00
Hospital OPD/ER ⁶	2.79	3.58	1.35	1.07	0.68	1.43	11.67	11.49	10.18	11.55	11.24	12.54	9.10	4.71	3.93	8.59
	0.21	0.66	0.23	0.25	0.25	0.18	2.11	1.45	1.95	3.31	0.97	2.21	2.12	1.17	2.04	1.28
Other clinic/health center	3.95	8.13	2.74	2.44	2.41	3.17	12.52	8.21	6.09	4.53	8.54	13.40	3.47	4.21	13.29	6.44
	0.21	1.16	0.30	0.26	0.45	0.22	2.22	1.61	1.61	2.03	1.10	2.10	1.25	0.82	3.58	0.89
Difficulty Obtaining Care																
Yes	3.14	8.96	2.54	1.71	1.68	2.85	8.07	3.21	6.19	4.41	5.19	9.25	1.66	3.68	3.65	3.89
	0.18	1.04	0.26	0.24	0.44	0.18	1.76	0.86	1.58	1.98	0.65	2.45	0.66	1.53	2.59	0.82
No	96.86	91.04	97.46	98.29	98.32	97.15	91.93	96.79	93.81	95.59	94.81	90.75	98.34	96.32	96.35	96.11
	0.18	1.04	0.26	0.24	0.44	0.18	1.76	0.86	1.58	1.98	0.65	2.45	0.66	1.53	2.59	0.82
Delayed Care Due to Cost																
Yes	6.86	22.79	4.92	3.75	3.27	6.22	16.83	11.89	6.44	4.40	11.34	18.97	5.90	6.98	1.49	8.75
	0.25	1.40	0.35	0.36	0.61	0.28	2.32	2.07	1.53	1.97	1.07	3.41	1.59	2.07	1.47	1.07
No	93.14	77.21	95.08	96.25	96.73	93.78	83.17	88.11	93.56	95.60	88.66	81.03	94.10	93.02	98.51	91.25
	0.25	1.40	0.35	0.36	0.61	0.28	2.32	2.07	1.53	1.97	1.07	3.41	1.59	2.07	1.47	1.07

Table 5.3 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 1997 (2 of 2)

Community-Only Residents¹

Indicator of Access to Care ²	Total ³	White non-Hispanic					Black non-Hispanic					Hispanic				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,024	3,109	15,161	9,497	2,582	30,349	808	1,442	731	224	3,206	556	1,224	529	153	2,462
	<i>147</i>	<i>94</i>	<i>158</i>	<i>121</i>	<i>65</i>	<i>203</i>	<i>40</i>	<i>58</i>	<i>36</i>	<i>16</i>	<i>77</i>	<i>48</i>	<i>96</i>	<i>54</i>	<i>23</i>	<i>163</i>

Beneficiaries as a Percentage of Column Total

Continuity of Care

Length of Association with Usual Source of Care

No usual source ⁴	6.30	7.97	6.20	4.85	4.83	5.84	6.85	9.14	5.02	6.58	7.45	6.02	7.79	14.85	11.37	9.18
	<i>0.29</i>	<i>0.92</i>	<i>0.43</i>	<i>0.42</i>	<i>0.67</i>	<i>0.31</i>	<i>1.19</i>	<i>1.65</i>	<i>1.25</i>	<i>2.43</i>	<i>0.85</i>	<i>2.34</i>	<i>1.62</i>	<i>3.20</i>	<i>6.42</i>	<i>1.30</i>
Less than 1 year	10.32	11.76	10.31	9.14	9.69	10.04	11.69	9.67	10.86	15.36	10.83	9.58	12.83	13.04	12.43	12.14
	<i>0.36</i>	<i>1.24</i>	<i>0.60</i>	<i>0.62</i>	<i>0.79</i>	<i>0.41</i>	<i>2.27</i>	<i>1.38</i>	<i>1.92</i>	<i>4.12</i>	<i>1.01</i>	<i>2.39</i>	<i>2.18</i>	<i>2.15</i>	<i>4.28</i>	<i>1.50</i>
1 to less than 3 years	18.81	22.56	18.00	17.15	15.70	18.00	24.72	16.96	15.54	18.49	18.66	28.26	28.02	22.41	22.68	26.51
	<i>0.48</i>	<i>1.52</i>	<i>0.75</i>	<i>0.76</i>	<i>1.13</i>	<i>0.48</i>	<i>3.15</i>	<i>2.26</i>	<i>2.21</i>	<i>3.66</i>	<i>1.59</i>	<i>4.28</i>	<i>3.07</i>	<i>3.35</i>	<i>4.38</i>	<i>2.00</i>
3 to less than 5 years	15.94	17.50	16.11	15.11	16.43	15.96	18.28	13.63	17.84	13.41	15.73	23.90	15.58	13.27	10.57	16.57
	<i>0.39</i>	<i>1.39</i>	<i>0.65</i>	<i>0.65</i>	<i>1.00</i>	<i>0.43</i>	<i>2.95</i>	<i>1.95</i>	<i>2.37</i>	<i>3.25</i>	<i>1.19</i>	<i>4.34</i>	<i>2.22</i>	<i>2.66</i>	<i>3.65</i>	<i>1.52</i>
5 years or more	48.63	40.21	49.37	53.75	53.35	50.15	38.47	50.59	50.73	46.17	47.32	32.23	35.78	36.43	42.94	35.60
	<i>0.66</i>	<i>1.43</i>	<i>1.00</i>	<i>0.97</i>	<i>1.72</i>	<i>0.71</i>	<i>2.80</i>	<i>3.11</i>	<i>2.81</i>	<i>4.97</i>	<i>1.85</i>	<i>3.86</i>	<i>3.21</i>	<i>4.17</i>	<i>6.52</i>	<i>2.15</i>

Source: Medicare Current Beneficiary Survey, CY 1997 Cost and Use Public Use File, CY 1997 Access to Care Public Use File, supplemented by CY 1996 and CY 1998 Access to Care Public Use Files as needed to fill in missing data for sample persons not in the CY 1997 file.

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Responses for sample persons not interviewed in Round 19 (i.e., the 1997 Access to Care Public Use File) were taken from their Round 16 interview (i.e., the 1996 Access to Care Public Use File) or from their Round 22 interview (i.e., the 1998 Access to Care Public Use File).
- 3 *Total* includes persons of other race/ethnicity and persons who did not report their race/ethnicity.
- 4 The percentage of responses for *none* under *usual source of care* differs from the percentage of responses for *no usual source* under *length of association with usual source of care* because of differences in the number of missing responses for the two variables. See the entry *missing values* in Appendix B for further explanation.
- 5 *HMO* stands for Health Maintenance Organization.
- 6 *OPD* stands for Outpatient Department; *ER* stands for Emergency Room.

Table 5.4 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 1997 (1 of 2)

Community-Only Residents¹

Measure of Satisfaction ²	Total ³	White non-Hispanic					Black non-Hispanic					Hispanic				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,024	3,109	15,161	9,497	2,582	30,349	808	1,442	731	224	3,206	556	1,224	529	153	2,462
	147	94	158	121	65	203	40	58	36	16	77	48	96	54	23	163
Beneficiaries as a Percentage of Column Total⁴																
Quality of Care																
General Care																
Very satisfied	28.62	21.63	34.81	29.31	24.65	30.89	19.40	17.94	19.15	13.40	18.26	17.40	20.93	16.31	19.08	19.03
	0.68	1.52	1.03	1.00	1.37	0.77	2.56	2.05	2.95	2.76	1.50	2.72	3.40	2.15	4.44	1.73
(Very) Unsatisfied	3.52	6.46	2.97	3.02	4.07	3.43	4.33	3.65	1.82	2.03	3.29	11.57	3.71	1.47	2.34	4.88
	0.18	0.93	0.29	0.32	0.70	0.20	1.65	1.09	0.82	1.42	0.70	3.03	1.14	0.84	1.82	0.83
Follow-up Care																
Very satisfied	17.12	18.17	19.57	17.12	12.64	18.07	15.44	9.47	11.33	9.23	11.37	10.48	18.20	14.59	18.18	15.71
	0.53	1.48	0.80	0.81	0.95	0.60	2.66	1.82	2.14	2.39	1.33	2.82	2.64	2.15	4.25	1.47
(Very) Unsatisfied	2.86	5.62	2.14	2.31	3.16	2.63	1.97	4.18	2.09	2.77	3.05	9.89	3.06	3.05	2.34	4.52
	0.17	0.79	0.23	0.26	0.58	0.18	0.79	1.14	0.91	1.58	0.60	2.62	1.02	1.45	1.82	0.79
Access/Coordination of Care																
Availability																
Very satisfied	10.37	11.51	11.72	9.42	9.42	10.78	9.57	4.77	5.93	4.59	6.22	8.79	14.31	8.57	14.38	11.86
	0.44	1.36	0.74	0.60	0.75	0.51	1.99	1.10	1.42	1.49	0.76	2.38	2.24	1.80	4.36	1.13
(Very) Unsatisfied	2.75	6.48	2.23	2.17	2.23	2.64	7.10	1.88	1.49	3.91	3.24	7.20	1.68	2.03	0.00	2.88
	0.20	0.75	0.29	0.26	0.44	0.21	1.98	0.71	0.81	1.89	0.70	2.30	0.69	0.52	0.00	0.70
Ease of Access to Doctor																
Very satisfied	18.14	13.34	22.36	17.31	14.61	19.21	11.43	13.95	8.78	6.19	11.59	11.25	19.11	10.87	16.46	15.43
	0.60	1.25	0.88	0.91	0.89	0.67	2.36	2.12	1.69	2.22	1.33	2.69	2.46	2.61	4.23	1.25
(Very) Unsatisfied	5.03	10.24	3.24	4.46	7.18	4.66	8.85	5.24	8.76	8.02	7.15	10.53	3.53	5.91	11.14	6.06
	0.26	1.03	0.35	0.35	0.79	0.28	2.14	1.16	1.77	2.35	0.92	2.44	0.96	1.69	2.75	0.82
Can Obtain Care in Same Location																
Very satisfied	14.18	13.59	15.98	13.36	11.14	14.51	13.67	11.18	12.32	6.23	11.72	11.02	17.63	13.32	12.61	14.92
	0.55	1.59	0.75	0.81	1.15	0.63	2.86	2.07	1.81	2.32	1.42	2.48	2.66	2.03	3.94	1.39
(Very) Unsatisfied	4.18	9.06	3.60	3.23	4.01	4.07	3.75	5.27	0.67	2.40	3.63	7.31	3.97	6.05	6.15	5.30
	0.26	1.03	0.34	0.40	0.61	0.29	0.91	1.21	0.52	1.38	0.58	1.27	1.37	1.61	2.50	0.77

Table 5.4 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Race/Ethnicity and Age, 1997 (2 of 2)

Community-Only Residents¹

Measure of Satisfaction ²	Total ³	White non-Hispanic					Black non-Hispanic					Hispanic				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,024	3,109	15,161	9,497	2,582	30,349	808	1,442	731	224	3,206	556	1,224	529	153	2,462
	<i>147</i>	<i>94</i>	<i>158</i>	<i>121</i>	<i>65</i>	<i>203</i>	<i>40</i>	<i>58</i>	<i>36</i>	<i>16</i>	<i>77</i>	<i>48</i>	<i>96</i>	<i>54</i>	<i>23</i>	<i>163</i>
Beneficiaries as a Percentage of Column Total⁴																
Relationship with Primary Doctor																
Information from Doctor																
Very satisfied	17.04	15.09	20.26	16.00	12.46	17.74	16.74	11.30	13.34	6.63	12.80	14.06	17.35	14.87	18.15	16.13
	<i>0.58</i>	<i>1.47</i>	<i>0.78</i>	<i>0.84</i>	<i>1.07</i>	<i>0.64</i>	<i>2.50</i>	<i>2.15</i>	<i>2.56</i>	<i>1.99</i>	<i>1.57</i>	<i>3.39</i>	<i>3.18</i>	<i>2.45</i>	<i>4.57</i>	<i>1.66</i>
(Very) Unsatisfied	5.08	8.48	4.22	5.34	5.39	5.10	4.18	4.28	3.04	3.53	3.92	10.14	4.49	1.89	2.54	5.06
	<i>0.24</i>	<i>1.08</i>	<i>0.37</i>	<i>0.49</i>	<i>0.73</i>	<i>0.28</i>	<i>1.11</i>	<i>1.02</i>	<i>1.06</i>	<i>1.76</i>	<i>0.60</i>	<i>2.57</i>	<i>1.26</i>	<i>0.83</i>	<i>1.74</i>	<i>0.85</i>
Doctor's Concern for Overall Health																
Very satisfied	18.98	19.44	21.91	18.44	15.27	20.01	14.05	14.06	11.88	9.00	13.21	14.58	17.35	17.88	20.73	17.06
	<i>0.57</i>	<i>1.52</i>	<i>0.80</i>	<i>0.86</i>	<i>1.08</i>	<i>0.64</i>	<i>2.46</i>	<i>2.00</i>	<i>2.02</i>	<i>2.36</i>	<i>1.44</i>	<i>2.47</i>	<i>2.54</i>	<i>2.32</i>	<i>5.64</i>	<i>1.11</i>
(Very) Unsatisfied	4.52	7.48	4.05	4.68	4.79	4.66	3.19	4.68	1.82	3.63	3.58	8.36	2.66	0.81	0.00	3.36
	<i>0.20</i>	<i>1.00</i>	<i>0.34</i>	<i>0.40</i>	<i>0.70</i>	<i>0.22</i>	<i>1.02</i>	<i>1.32</i>	<i>0.82</i>	<i>1.77</i>	<i>0.65</i>	<i>2.47</i>	<i>0.92</i>	<i>0.54</i>	<i>0.00</i>	<i>0.78</i>
Cost of Care																
Cost																
Very satisfied	16.46	13.65	18.74	16.03	13.64	16.94	16.93	9.46	9.84	7.51	11.28	8.68	18.25	16.51	16.42	15.66
	<i>0.48</i>	<i>1.21</i>	<i>0.77</i>	<i>0.74</i>	<i>1.02</i>	<i>0.52</i>	<i>2.87</i>	<i>1.75</i>	<i>1.78</i>	<i>2.09</i>	<i>1.24</i>	<i>2.30</i>	<i>2.41</i>	<i>2.71</i>	<i>5.10</i>	<i>1.20</i>
(Very) Unsatisfied	11.03	19.79	9.84	9.31	9.32	10.64	15.96	17.16	10.40	9.83	14.79	19.27	10.41	9.33	7.99	11.97
	<i>0.45</i>	<i>1.46</i>	<i>0.67</i>	<i>0.47</i>	<i>0.99</i>	<i>0.46</i>	<i>3.04</i>	<i>2.19</i>	<i>1.84</i>	<i>3.43</i>	<i>1.43</i>	<i>3.22</i>	<i>2.48</i>	<i>2.64</i>	<i>3.83</i>	<i>2.04</i>

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Responses for sample persons not interviewed in Round 19 (i.e., the 1997 Access to Care Public Use File) were taken from their Round 16 interview (i.e., the 1996 Access to Care Public Use File) or from their Round 22 interview (i.e., the 1998 Access to Care Public Use File).
- 3 *Total* includes persons of other race/ethnicity and persons who did not report their race/ethnicity.
- 4 Column percentages do not sum to 100 percent because the responses of *satisfied* and *no experience* are excluded from the table for all satisfaction variables.

Table 5.5 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Living Arrangement and Age, 1997 (1 of 2)

Community-Only Residents¹

Indicator of Access to Care ²	Total	Lives Alone					Lives with Spouse					Lives with Children/Others				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,024	1,131	4,292	3,968	1,551	10,942	1,942	11,903	5,419	723	19,988	1,533	2,236	1,586	736	6,091
	147	65	109	105	50	143	79	153	105	38	171	55	93	70	42	130
Beneficiaries as a Percentage of Column Total Access to Care																
Usual Source of Care																
None ³	6.27	9.83	8.23	5.46	6.12	7.08	2.85	5.79	5.14	3.45	5.24	12.77	7.70	5.94	4.97	8.18
	0.29	1.71	1.04	0.67	0.85	0.55	0.60	0.51	0.59	0.97	0.37	1.58	1.21	1.25	1.30	0.72
Doctor's office	71.64	53.39	68.37	76.30	76.90	70.97	70.71	71.12	74.79	81.74	72.46	60.69	68.99	76.72	78.91	70.14
	1.06	3.14	1.76	1.95	2.18	1.51	2.11	1.26	1.51	2.34	1.15	1.98	2.37	2.06	2.48	1.32
Doctor's clinic	7.97	11.64	8.46	7.68	6.84	8.27	8.40	9.09	7.47	6.20	8.48	7.76	4.84	6.02	3.94	5.77
	0.94	2.56	1.13	1.57	1.59	1.29	1.64	0.97	1.18	1.96	0.98	1.26	1.15	1.35	1.15	0.83
HMO ⁴	7.38	3.46	7.54	6.19	5.16	6.30	6.72	9.15	8.16	6.10	8.54	2.55	8.43	4.42	4.98	5.49
	0.31	1.30	0.82	0.67	0.82	0.42	0.96	0.59	0.72	1.12	0.45	0.79	1.23	1.02	1.30	0.60
Hospital OPD/ER ⁵	2.79	10.20	3.38	1.86	2.19	3.34	3.34	1.83	1.31	0.19	1.78	6.80	5.83	3.86	2.49	5.15
	0.21	1.80	0.64	0.41	0.58	0.39	0.91	0.24	0.30	0.19	0.21	0.97	1.27	0.71	0.90	0.50
Other clinic/health center	3.95	11.48	4.01	2.51	2.79	4.04	7.99	3.01	3.13	2.32	3.50	9.43	4.21	3.05	4.72	5.27
	0.21	2.59	0.61	0.47	0.73	0.41	1.47	0.36	0.31	0.73	0.29	1.23	0.98	0.78	1.20	0.53
Difficulty Obtaining Care																
Yes	3.14	11.08	3.16	1.94	1.88	3.33	7.56	2.11	1.72	0.97	2.49	8.24	4.00	3.90	3.35	4.96
	0.18	1.63	0.57	0.34	0.51	0.33	1.21	0.29	0.36	0.57	0.24	1.41	0.81	0.78	0.97	0.47
No	96.86	88.92	96.84	98.06	98.12	96.67	92.44	97.89	98.28	99.03	97.51	91.76	96.00	96.10	96.65	95.04
	0.18	1.63	0.57	0.34	0.51	0.33	1.21	0.29	0.36	0.57	0.24	1.41	0.81	0.78	0.97	0.47
Delayed Care Due to Cost																
Yes	6.86	25.45	6.91	4.31	3.62	7.37	20.92	4.29	3.27	2.24	5.53	18.79	9.67	6.3	3.58	10.34
	0.25	2.29	0.91	0.69	0.87	0.51	1.84	0.37	0.43	0.85	0.32	2.21	1.36	1.23	1.04	0.81
No	93.14	74.55	93.09	95.69	96.38	92.63	79.08	95.71	96.73	97.76	94.47	81.21	90.33	93.70	96.42	89.66
	0.25	2.29	0.91	0.69	0.87	0.51	1.84	0.37	0.43	0.85	0.32	2.21	1.36	1.23	1.04	0.81

Table 5.5 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Living Arrangement and Age, 1997 (2 of 2)

Community-Only Residents¹

Indicator of Access to Care ²	Total	Lives Alone					Lives with Spouse					Lives with Children/Others				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,024	1,131	4,292	3,968	1,551	10,942	1,942	11,903	5,419	723	19,988	1,533	2,236	1,586	736	6,091
	<i>147</i>	<i>65</i>	<i>109</i>	<i>105</i>	<i>50</i>	<i>143</i>	<i>79</i>	<i>153</i>	<i>105</i>	<i>38</i>	<i>171</i>	<i>55</i>	<i>93</i>	<i>70</i>	<i>42</i>	<i>130</i>
Beneficiaries as a Percentage of Column Total																
Continuity of Care																
Length of Association with Usual Source of Care																
No usual source ³	6.30	9.89	8.26	5.49	6.28	7.13	2.85	5.80	5.16	3.47	5.26	12.98	7.73	6.00	5.05	8.26
	<i>0.29</i>	<i>1.72</i>	<i>1.04</i>	<i>0.68</i>	<i>0.87</i>	<i>0.55</i>	<i>0.61</i>	<i>0.51</i>	<i>0.59</i>	<i>0.98</i>	<i>0.37</i>	<i>1.59</i>	<i>1.21</i>	<i>1.27</i>	<i>1.32</i>	<i>0.72</i>
Less than 1 year	10.32	12.66	12.22	10.45	9.43	11.23	11.42	9.74	7.82	8.39	9.33	9.82	12.98	11.85	13.59	11.97
	<i>0.36</i>	<i>2.13</i>	<i>0.91</i>	<i>0.94</i>	<i>1.00</i>	<i>0.58</i>	<i>1.33</i>	<i>0.68</i>	<i>0.70</i>	<i>1.46</i>	<i>0.47</i>	<i>1.37</i>	<i>1.71</i>	<i>1.41</i>	<i>2.07</i>	<i>0.88</i>
1 to less than 3 years	18.81	24.02	19.61	17.21	17.47	18.88	23.93	18.13	17.59	11.25	18.29	22.84	21.85	16.67	19.33	20.43
	<i>0.48</i>	<i>2.90</i>	<i>1.21</i>	<i>1.03</i>	<i>1.38</i>	<i>0.74</i>	<i>2.13</i>	<i>0.85</i>	<i>0.94</i>	<i>1.67</i>	<i>0.60</i>	<i>2.05</i>	<i>2.02</i>	<i>1.56</i>	<i>2.39</i>	<i>1.10</i>
3 to less than 5 years	15.94	18.36	15.43	16.04	16.40	16.08	19.11	16.18	14.39	15.64	15.95	17.67	14.04	16.14	15.17	15.63
	<i>0.39</i>	<i>2.57</i>	<i>1.17</i>	<i>1.18</i>	<i>1.50</i>	<i>0.72</i>	<i>1.77</i>	<i>0.72</i>	<i>0.84</i>	<i>2.20</i>	<i>0.53</i>	<i>1.69</i>	<i>1.67</i>	<i>1.62</i>	<i>1.97</i>	<i>0.91</i>
5 years or more	48.63	35.08	44.49	50.80	50.42	46.67	42.69	50.16	55.04	61.25	51.17	36.68	43.41	49.34	46.87	43.71
	<i>0.66</i>	<i>2.34</i>	<i>1.55</i>	<i>1.47</i>	<i>1.96</i>	<i>0.97</i>	<i>2.11</i>	<i>1.14</i>	<i>1.13</i>	<i>2.91</i>	<i>0.77</i>	<i>1.94</i>	<i>2.42</i>	<i>2.43</i>	<i>3.24</i>	<i>1.44</i>

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Responses for sample persons not interviewed in Round 19 (i.e., the 1997 Access to Care Public Use File) were taken from their Round 16 interview (i.e., the 1996 Access to Care Public Use File) or from their Round 22 interview (i.e., the 1998 Access to Care Public Use File).
- 3 The percentage of responses for *none* under *usual source of care* differs from the percentage of responses for *no usual source* under *length of association with usual source of care* because of differences in the number of missing responses for the two variables. See the entry *missing values* in Appendix B for further explanation.
- 4 *HMO* stands for Health Maintenance Organization.
- 5 *OPD* stands for Outpatient Department; *ER* stands for Emergency Room.

Table 5.6 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Living Arrangement and Age, 1997 (1 of 2)
Community-Only Residents¹

Measure of Satisfaction ²	Total	Lives Alone					Lives with Spouse					Lives with Children/Others				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,024	1,131	4,292	3,968	1,551	10,942	1,942	11,903	5,419	723	19,988	1,533	2,236	1,586	736	6,091
	147	65	109	105	50	143	79	153	105	38	171	55	93	70	42	130
Beneficiaries as a Percentage of Column Total³																
Quality of Care																
General Care																
Very satisfied	28.62	17.70	26.68	25.62	22.24	24.76	23.19	34.71	30.42	22.77	32.01	19.36	27.00	24.45	26.50	24.37
	0.68	2.33	1.47	1.24	1.52	0.85	1.91	1.24	1.23	2.41	0.95	1.54	1.84	2.05	2.58	1.10
(Very) Unsatisfied	3.52	7.62	3.65	2.95	3.99	3.84	5.89	2.65	2.60	3.66	2.98	6.70	4.07	4.19	3.94	4.74
	0.18	1.74	0.63	0.50	0.82	0.35	1.15	0.32	0.44	1.22	0.25	1.36	0.90	0.67	1.30	0.51
Follow-up Care																
Very satisfied	17.12	14.62	16.20	15.42	11.53	15.10	18.89	19.63	17.78	13.58	18.84	15.11	15.94	14.43	13.78	15.08
	0.53	2.22	1.29	1.10	1.18	0.72	1.91	0.91	0.98	1.93	0.73	1.47	1.65	1.77	1.97	0.77
(Very) Unsatisfied	2.86	7.73	2.86	2.50	3.41	3.30	4.44	2.35	2.20	3.00	2.54	4.75	2.66	2.60	2.26	3.12
	0.17	1.90	0.55	0.43	0.79	0.35	0.98	0.28	0.34	1.13	0.22	0.99	0.68	0.67	0.79	0.41
Access/Coordination of Care																
Availability																
Very satisfied	10.37	9.77	9.77	8.40	6.92	8.87	11.75	12.04	9.20	11.03	11.20	10.22	9.66	10.50	12.31	10.34
	0.44	1.82	0.95	0.89	0.98	0.56	1.83	0.87	0.79	1.74	0.64	1.18	1.37	1.40	1.67	0.62
(Very) Unsatisfied	2.75	7.92	2.27	2.45	2.13	2.89	5.53	2.12	1.86	2.08	2.38	7.55	2.39	2.45	2.77	3.74
	0.20	1.52	0.43	0.40	0.57	0.29	1.07	0.32	0.36	0.86	0.27	1.44	0.66	0.67	0.83	0.56
Ease of Access to Doctor																
Very satisfied	18.14	13.33	17.21	15.29	13.41	15.58	11.91	23.00	18.53	15.70	20.46	13.31	19.38	11.55	13.63	15.12
	0.60	2.19	1.11	1.21	1.29	0.81	1.44	1.00	0.98	1.80	0.73	1.41	1.69	1.47	1.88	0.95
(Very) Unsatisfied	5.03	13.66	4.56	5.77	7.72	6.37	8.04	2.59	3.76	7.07	3.59	9.60	6.44	6.93	6.91	7.41
	0.26	2.05	0.69	0.68	0.97	0.48	1.13	0.30	0.44	1.43	0.28	1.39	1.21	1.10	1.35	0.67
Can Obtain Care in Same Location																
Very satisfied	14.18	15.30	13.07	14.17	9.96	13.26	13.04	16.76	13.30	10.01	15.22	12.28	13.61	10.52	13.25	12.42
	0.55	2.70	1.14	1.25	1.16	0.81	1.53	0.81	0.93	1.77	0.65	1.43	1.57	1.38	2.09	0.80
(Very) Unsatisfied	4.18	7.58	3.91	3.86	3.91	4.26	9.00	3.90	2.71	3.86	4.06	6.56	3.43	3.90	4.27	4.43
	0.26	1.40	0.64	0.57	0.79	0.42	1.34	0.42	0.50	1.03	0.35	0.96	0.83	0.97	1.24	0.46

Table 5.6 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Living Arrangement and Age, 1997 (2 of 2)

Community-Only Residents¹

Measure of Satisfaction ²	Total	Lives Alone					Lives with Spouse					Lives with Children/Others				
		< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total	< 65	65 - 74	75 - 84	85 +	Total
Beneficiaries (in 000s)	37,024	1,131	4,292	3,968	1,551	10,942	1,942	11,903	5,419	723	19,988	1,533	2,236	1,586	736	6,091
	<i>147</i>	<i>65</i>	<i>109</i>	<i>105</i>	<i>50</i>	<i>143</i>	<i>79</i>	<i>153</i>	<i>105</i>	<i>38</i>	<i>171</i>	<i>55</i>	<i>93</i>	<i>70</i>	<i>42</i>	<i>130</i>
Beneficiaries as a Percentage of Column Total³																
Relationship with Primary Doctor																
Information from Doctor																
Very satisfied	17.04	14.34	17.15	14.45	10.87	14.99	16.33	20.31	17.16	12.00	18.77	14.29	16.62	13.05	15.64	14.99
	<i>0.58</i>	<i>2.18</i>	<i>1.28</i>	<i>1.10</i>	<i>1.23</i>	<i>0.71</i>	<i>1.95</i>	<i>0.86</i>	<i>1.06</i>	<i>1.77</i>	<i>0.74</i>	<i>1.41</i>	<i>1.75</i>	<i>1.74</i>	<i>2.08</i>	<i>0.92</i>
(Very) Unsatisfied	5.08	8.66	4.82	4.68	5.47	5.25	8.44	4.12	5.35	6.82	4.96	6.37	4.71	5.33	3.46	5.14
	<i>0.24</i>	<i>1.76</i>	<i>0.68</i>	<i>0.56</i>	<i>0.84</i>	<i>0.42</i>	<i>1.31</i>	<i>0.42</i>	<i>0.62</i>	<i>1.46</i>	<i>0.31</i>	<i>1.23</i>	<i>0.88</i>	<i>1.00</i>	<i>0.89</i>	<i>0.54</i>
Doctor's Concern for Overall Health																
Very satisfied	18.98	15.45	17.64	16.79	14.00	16.59	21.73	21.92	18.97	14.70	20.84	13.97	19.49	16.88	17.27	17.16
	<i>0.57</i>	<i>2.16</i>	<i>1.15</i>	<i>1.27</i>	<i>1.29</i>	<i>0.74</i>	<i>1.97</i>	<i>0.92</i>	<i>1.04</i>	<i>1.94</i>	<i>0.75</i>	<i>1.42</i>	<i>1.69</i>	<i>1.87</i>	<i>2.14</i>	<i>0.89</i>
(Very) Unsatisfied	4.52	7.99	4.61	4.32	5.05	4.91	5.70	3.77	4.26	5.35	4.14	7.31	4.99	4.49	1.96	5.08
	<i>0.20</i>	<i>1.40</i>	<i>0.74</i>	<i>0.57</i>	<i>0.97</i>	<i>0.41</i>	<i>0.91</i>	<i>0.38</i>	<i>0.50</i>	<i>1.43</i>	<i>0.27</i>	<i>1.45</i>	<i>0.88</i>	<i>0.98</i>	<i>0.75</i>	<i>0.51</i>
Cost of Care																
Cost																
Very satisfied	16.46	12.41	15.04	14.92	11.93	14.30	11.29	19.52	16.97	14.29	17.85	16.62	16.11	14.04	16.59	15.75
	<i>0.48</i>	<i>1.91</i>	<i>1.16</i>	<i>1.12</i>	<i>1.31</i>	<i>0.69</i>	<i>1.80</i>	<i>0.93</i>	<i>1.01</i>	<i>1.89</i>	<i>0.70</i>	<i>1.54</i>	<i>1.83</i>	<i>1.56</i>	<i>2.00</i>	<i>0.91</i>
(Very) Unsatisfied	11.03	21.40	10.50	9.45	8.41	10.92	20.01	9.84	8.92	11.46	10.62	16.83	12.35	10.42	8.91	12.55
	<i>0.45</i>	<i>2.47</i>	<i>1.16</i>	<i>0.72</i>	<i>1.24</i>	<i>0.58</i>	<i>1.77</i>	<i>0.67</i>	<i>0.64</i>	<i>1.89</i>	<i>0.51</i>	<i>1.86</i>	<i>1.51</i>	<i>1.35</i>	<i>1.53</i>	<i>0.90</i>

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Responses for sample persons not interviewed in Round 19 (i.e., the 1997 Access to Care Public Use File) were taken from their Round 16 interview (i.e., the 1996 Access to Care Public Use File) or from their Round 22 interview (i.e., the 1998 Access to Care Public Use File).
- 3 Column percentages do not sum to 100 percent because the responses of *satisfied* and *no experience* are excluded from the table for all satisfaction variables.

Table 5.7 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Health Status, 1997 (1 of 2)

Community-Only Residents¹

Indicator of Access to Care ²	Total ³	Indicators of Good Health ³			Indicators of Poor Health ³		
		Excellent/Very Good Health	No Functional Limitations ⁴	Both Indicators	Fair/Poor Health	Three to Five ADLs ⁵	Both Indicators
Beneficiaries (in 000s)	37,024	15,534	22,197	12,352	10,054	2,486	1,712
	147	224	214	183	189	99	72
Beneficiaries as a Percentage of Column Total Access to Care							
Usual Source of Care							
None ⁶	6.27	8.56	7.20	9.01	4.70	3.35	3.45
	0.29	0.51	0.38	0.60	0.44	0.61	0.83
Doctor's office	71.64	70.01	71.35	69.82	72.41	71.53	72.78
	1.06	1.30	1.15	1.35	1.24	2.55	2.62
Doctor's clinic	7.97	7.90	7.70	7.74	7.77	8.89	8.02
	0.94	0.89	0.91	0.94	1.12	2.18	1.78
HMO ⁷	7.38	8.94	8.22	9.21	5.07	5.21	5.09
	0.31	0.48	0.42	0.56	0.48	0.98	1.20
Hospital OPD/ER ⁸	2.79	1.85	2.41	1.85	4.32	4.46	4.57
	0.21	0.23	0.23	0.27	0.41	0.89	1.05
Other clinic/health center	3.95	2.74	3.12	2.36	5.72	6.56	6.08
	0.21	0.27	0.25	0.29	0.46	0.88	1.00
Difficulty Obtaining Care							
Yes	3.14	1.68	1.74	1.36	5.89	10.02	11.36
	0.18	0.22	0.20	0.25	0.46	1.08	1.41
No	96.86	98.32	98.26	98.64	94.11	89.98	88.64
	0.18	0.22	0.20	0.25	0.46	1.08	1.41
Delayed Care Due to Cost							
Yes	6.86	3.31	3.88	2.79	13.26	12.68	14.94
	0.25	0.29	0.29	0.32	0.70	1.45	1.98
No	93.14	96.69	96.12	97.21	86.74	87.32	85.06
	0.25	0.29	0.29	0.32	0.70	1.45	1.98

Table 5.7 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Health Status, 1997 (2 of 2)

Community-Only Residents¹

Indicator of Access to Care ²	Total ³	Indicators of Good Health ³			Indicators of Poor Health ³		
		Excellent/Very Good Health	No Functional Limitations ⁴	Both Indicators	Fair/Poor Health	Three to Five ADLs ⁵	Both Indicators
Beneficiaries (in 000s)	37,024	15,534	22,197	12,352	10,054	2,486	1,712
	<i>147</i>	<i>224</i>	<i>214</i>	<i>183</i>	<i>189</i>	<i>99</i>	<i>72</i>
Beneficiaries as a Percentage of Column Total							
Continuity of Care							
Length of Association with Usual Source of Care							
No usual source ⁶	6.30	8.58	7.22	9.02	4.74	3.40	3.49
	<i>0.29</i>	<i>0.51</i>	<i>0.38</i>	<i>0.60</i>	<i>0.45</i>	<i>0.62</i>	<i>0.84</i>
Less than 1 year	10.32	9.64	9.73	9.57	12.10	11.46	10.68
	<i>0.36</i>	<i>0.57</i>	<i>0.51</i>	<i>0.66</i>	<i>0.74</i>	<i>1.22</i>	<i>1.57</i>
1 to less than 3 years	18.81	18.31	18.59	18.14	19.06	19.83	19.02
	<i>0.48</i>	<i>0.57</i>	<i>0.60</i>	<i>0.71</i>	<i>0.79</i>	<i>1.20</i>	<i>1.52</i>
3 to less than 5 years	15.94	14.91	14.87	14.61	16.95	17.24	18.53
	<i>0.39</i>	<i>0.49</i>	<i>0.47</i>	<i>0.60</i>	<i>0.82</i>	<i>1.35</i>	<i>1.71</i>
5 years or more	48.63	48.56	49.60	48.67	47.15	48.07	48.28
	<i>0.66</i>	<i>0.89</i>	<i>0.77</i>	<i>1.04</i>	<i>1.14</i>	<i>1.79</i>	<i>2.18</i>

Source: Medicare Current Beneficiary Survey, CY 1997 Cost and Use Public Use File, CY 1997 Access to Care Public Use File, supplemented by CY 1996 and CY 1998 Access to Care Public Use Files as needed to fill in missing data for sample persons not in the CY 1997 file.

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- ¹ The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- ² Responses for sample persons not interviewed in Round 19 (i.e., the 1997 Access to Care Public Use File) were taken from their Round 16 interview (i.e., the 1996 Access to Care Public Use File) or from their Round 22 interview (i.e., the 1998 Access to Care Public Use File).
- ³ *Indicators of good health* and *indicators of poor health* do not contain mutually exclusive categories. Therefore, beneficiary counts sum to more than the total number of Medicare beneficiaries.
- ⁴ *No functional limitations* means that the beneficiary did not report limitations in any instrumental activities of daily living (IADLs) or activities of daily living (ADLs). See Appendix B for definitions of IADL and ADL.
- ⁵ ADL stands for Activity of Daily Living.
- ⁶ The percentage of responses for *none* under *usual source of care* differs from the percentage of responses for *no usual source* under *length of association with usual source of care* because of differences in the number of missing responses for the two variables. See the entry *missing values* in Appendix B for further explanation.
- ⁷ HMO stands for Health Maintenance Organization.
- ⁸ OPD stands for Outpatient Department; ER stands for Emergency Room.

Table 5.8 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Health Status, 1997 (1 of 2)

Community-Only Residents¹

Measure of Satisfaction ²	Total ³	Indicators of Good Health ³			Indicators of Poor Health ³		
		Excellent/Very Good Health	No Functional Limitations ⁴	Both Indicators	Fair/Poor Health	Three to Five ADLs ⁵	Both Indicators
Beneficiaries (in 000s)	37,024	15,534	22,197	12,352	10,054	2,486	1,712
	147	224	214	183	189	99	72
Beneficiaries as a Percentage of Column Total⁶							
Quality of Care							
General Care							
Very satisfied	28.62	35.59	30.79	36.00	21.50	24.05	21.27
	0.68	0.95	0.95	1.20	0.91	1.56	1.94
(Very) Unsatisfied	3.52	2.33	2.59	2.14	6.01	8.19	9.51
	0.18	0.27	0.23	0.29	0.40	0.91	1.29
Follow-up Care							
Very satisfied	17.12	20.46	17.60	20.32	14.39	15.19	12.58
	0.53	0.70	0.71	0.86	0.75	1.30	1.44
(Very) Unsatisfied	2.86	1.49	1.90	1.26	5.34	7.50	9.07
	0.17	0.20	0.18	0.20	0.40	1.10	1.45
Access/Coordination of Care							
Availability							
Very satisfied	10.37	11.07	10.64	11.33	10.00	10.48	10.48
	0.44	0.50	0.52	0.62	0.73	1.16	1.45
(Very) Unsatisfied	2.75	1.69	1.81	1.19	4.70	5.15	6.34
	0.20	0.27	0.20	0.22	0.41	0.66	0.94
Ease of Access to Doctor							
Very satisfied	18.14	23.20	20.76	24.22	12.54	12.57	11.06
	0.60	0.85	0.74	1.01	0.76	1.35	1.57
(Very) Unsatisfied	5.03	2.66	2.23	1.88	9.58	14.28	16.09
	0.26	0.27	0.18	0.27	0.66	1.47	1.97
Can Obtain Care in Same Location							
Very satisfied	14.18	17.47	15.39	17.98	11.46	12.44	10.40
	0.55	0.69	0.69	0.81	0.73	1.29	1.47
(Very) Unsatisfied	4.18	2.62	2.79	2.17	6.99	8.51	9.90
	0.26	0.31	0.27	0.31	0.52	1.00	1.46

Table 5.8 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Health Status, 1997 (2 of 2)

Community-Only Residents¹

Measure of Satisfaction ²	Total ³	Indicators of Good Health ³			Indicators of Poor Health ³		
		Excellent/Very Good Health	No Functional Limitations ⁴	Both Indicators	Fair/Poor Health	Three to Five ADLs ⁵	Both Indicators
Beneficiaries (in 000s)	37,024	15,534	22,197	12,352	10,054	2,486	1,712
	<i>147</i>	<i>224</i>	<i>214</i>	<i>183</i>	<i>189</i>	<i>99</i>	<i>72</i>
Beneficiaries as a Percentage of Column Total⁶							
Relationship with Primary Doctor							
Information from Doctor							
Very satisfied	17.04	21.28	18.31	21.81	13.56	13.91	11.78
	<i>0.58</i>	<i>0.84</i>	<i>0.74</i>	<i>0.95</i>	<i>0.83</i>	<i>1.52</i>	<i>1.86</i>
(Very) Unsatisfied	5.08	3.11	3.50	2.76	8.68	11.65	14.53
	<i>0.24</i>	<i>0.25</i>	<i>0.26</i>	<i>0.27</i>	<i>0.53</i>	<i>1.17</i>	<i>1.62</i>
Doctor's Concern for Overall Health							
Very satisfied	18.98	22.64	19.63	22.58	15.64	16.06	13.32
	<i>0.57</i>	<i>0.79</i>	<i>0.80</i>	<i>0.94</i>	<i>0.81</i>	<i>1.30</i>	<i>1.63</i>
(Very) Unsatisfied	4.52	2.84	3.38	2.61	7.53	10.63	12.52
	<i>0.20</i>	<i>0.25</i>	<i>0.25</i>	<i>0.29</i>	<i>0.40</i>	<i>1.02</i>	<i>1.46</i>
Cost of Care							
Cost							
Very satisfied	16.46	19.97	18.04	20.83	12.42	11.88	10.93
	<i>0.48</i>	<i>0.78</i>	<i>0.70</i>	<i>0.96</i>	<i>0.67</i>	<i>1.24</i>	<i>1.39</i>
(Very) Unsatisfied	11.03	7.63	7.95	7.14	17.09	19.92	22.87
	<i>0.45</i>	<i>0.49</i>	<i>0.44</i>	<i>0.53</i>	<i>0.90</i>	<i>1.67</i>	<i>2.08</i>

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Responses for sample persons not interviewed in Round 19 (i.e., the 1997 Access to Care Public Use File) were taken from their Round 16 interview (i.e., the 1996 Access to Care Public Use File) or from their Round 22 interview (i.e., the 1998 Access to Care Public Use File).
- 3 *Indicators of good health* and *indicators of poor health* do not contain mutually exclusive categories. Therefore, beneficiary counts sum to more than the total number of Medicare beneficiaries.
- 4 *No functional limitations* means that the beneficiary did not report limitations in any instrumental activities of daily living (IADLs) or activities of daily living (ADLs). See Appendix B for definitions of IADL and ADL.
- 5 ADL stands for Activity of Daily Living.
- 6 Column percentages do not sum to 100 percent because the responses of *satisfied* and *no experience* are excluded from the table for all satisfaction variables.

Table 5.9 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, 1997 (1 of 2)

Community-Only Residents¹

Indicator of Access to Care ²	Total	Medicare Fee-for-Service	Supplemental Health Insurance				Medicare HMO
		Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Beneficiaries (in 000s)	37,024	3,685	5,112	9,082	11,866	1,508	5,770
	147	123	126	168	203	89	175
Beneficiaries as a Percentage of Column Total Access to Care							
Usual Source of Care							
None ³	6.27	12.97	7.46	6.82	5.06	3.55	3.27
	0.29	0.97	0.80	0.52	0.46	0.96	0.41
Doctor's office	71.64	57.81	66.97	80.16	78.59	86.95	52.89
	1.06	1.76	1.47	2.22	1.08	1.95	1.73
Doctor's clinic	7.97	6.77	7.87	10.18	9.11	6.84	3.33
	0.94	1.22	1.02	2.13	0.87	1.38	0.49
HMO ⁴	7.38	0.76	2.80	0.05	3.32	0.00	37.33
	0.31	0.41	0.54	0.06	0.40	0.00	1.64
Hospital OPD/ER ⁵	2.79	5.36	8.74	0.94	1.72	0.89	1.56
	0.21	0.84	0.87	0.23	0.27	0.40	0.38
Other clinic/health center	3.95	16.33	6.15	1.86	2.19	1.76	1.62
	0.21	1.22	0.61	0.29	0.23	0.66	0.30
Difficulty Obtaining Care							
Yes	3.14	5.59	6.78	1.35	2.05	1.03	4.00
	0.18	0.69	0.73	0.23	0.31	0.50	0.52
No	96.86	94.41	93.22	98.65	97.95	98.97	96.00
	0.18	0.69	0.73	0.23	0.31	0.50	0.52
Delayed Care Due to Cost							
Yes	6.86	19.91	12.41	4.77	4.52	1.87	3.12
	0.25	1.13	1.03	0.44	0.41	0.67	0.38
No	93.14	80.09	87.59	95.23	95.48	98.13	96.88
	0.25	1.13	1.03	0.44	0.41	0.67	0.38

Table 5.9 Indicators of Access to Care for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, 1997 (2 of 2)

Community-Only Residents¹

Indicator of Access to Care ²	Total	Medicare Fee-for-Service Only	Supplemental Health Insurance				Medicare HMO
			Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Beneficiaries (in 000s)	37,024	3,685	5,112	9,082	11,866	1,508	5,770
	<i>147</i>	<i>123</i>	<i>126</i>	<i>168</i>	<i>203</i>	<i>89</i>	<i>175</i>
Beneficiaries as a Percentage of Column Total							
Continuity of Care							
Length of Association with Usual Source of Care							
No usual source ³	6.30	13.04	7.54	6.86	5.08	3.55	3.28
	<i>0.29</i>	<i>0.97</i>	<i>0.81</i>	<i>0.52</i>	<i>0.46</i>	<i>0.96</i>	<i>0.42</i>
Less than 1 year	10.32	9.85	12.65	6.41	8.63	6.91	19.10
	<i>0.36</i>	<i>0.79</i>	<i>0.95</i>	<i>0.45</i>	<i>0.60</i>	<i>1.51</i>	<i>1.03</i>
1 to less than 3 years	18.81	19.53	21.55	15.01	15.75	16.55	28.84
	<i>0.48</i>	<i>1.42</i>	<i>1.10</i>	<i>0.80</i>	<i>0.69</i>	<i>2.05</i>	<i>1.28</i>
3 to less than 5 years	15.94	16.80	17.54	15.71	15.76	13.67	15.33
	<i>0.39</i>	<i>1.27</i>	<i>0.98</i>	<i>0.79</i>	<i>0.68</i>	<i>1.48</i>	<i>0.86</i>
5 years or more	48.63	40.79	40.72	56.01	54.78	59.33	33.45
	<i>0.66</i>	<i>1.63</i>	<i>1.34</i>	<i>1.05</i>	<i>1.14</i>	<i>2.59</i>	<i>1.45</i>

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Responses for sample persons not interviewed in Round 19 (i.e., the 1997 Access to Care Public Use File) were taken from their Round 16 interview (i.e., the 1996 Access to Care Public Use File) or from their Round 22 interview (i.e., the 1998 Access to Care Public Use File).
- 3 The percentage of responses for *none* under *usual source of care* differs from the percentage of responses for *no usual source* under *length of association with usual source of care* because of differences in the number of missing responses for the two variables. See the entry *missing values* in Appendix B for further explanation.
- 4 *HMO* stands for Health Maintenance Organization.
- 5 *OPD* stands for Outpatient Department; *ER* stands for Emergency Room.

Table 5.10 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, 1997 (1 of 2)

Community-Only Residents¹

Measure of Satisfaction ²	Total	Medicare	Supplemental Health Insurance				Medicare HMO ³
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Beneficiaries (in 000s)	37,024	3,685	5,112	9,082	11,866	1,508	5,770
	147	123	126	168	203	89	175
Beneficiaries as a Percentage of Column Total⁴							
Quality of Care							
General Care							
Very satisfied	28.62	23.14	19.71	28.54	32.97	33.69	29.76
	0.68	1.49	1.14	1.10	1.02	2.32	1.30
(Very) Unsatisfied	3.52	5.70	4.96	2.18	2.84	2.49	4.68
	0.18	0.83	0.60	0.26	0.33	0.75	0.50
Follow-up Care							
Very satisfied	17.12	14.99	13.88	15.64	19.26	17.58	19.10
	0.53	1.48	0.80	0.87	0.90	1.98	1.06
(Very) Unsatisfied	2.86	4.19	3.52	2.48	2.51	1.47	3.10
	0.17	0.61	0.49	0.31	0.29	0.59	0.43
Access/Coordination of Care							
Availability							
Very satisfied	10.37	11.47	10.01	9.70	10.01	10.66	11.71
	0.44	1.26	0.93	0.70	0.62	1.54	0.77
(Very) Unsatisfied	2.75	4.32	4.39	1.98	2.05	3.41	2.80
	0.20	0.64	0.57	0.30	0.32	0.93	0.49
Ease of Access to Doctor							
Very satisfied	18.14	12.30	11.92	17.81	20.51	23.68	21.51
	0.60	1.19	0.96	1.04	0.92	2.09	1.10
(Very) Unsatisfied	5.03	7.98	9.70	3.60	3.93	3.97	3.90
	0.26	0.75	0.82	0.42	0.38	0.83	0.47
Can Obtain Care in Same Location							
Very satisfied	14.18	13.42	12.36	12.15	13.63	13.97	20.66
	0.55	1.27	0.89	0.91	0.75	1.84	1.05
(Very) Unsatisfied	4.18	5.78	4.87	3.42	4.41	5.73	2.90
	0.26	0.84	0.53	0.44	0.37	1.23	0.43

Table 5.10 Measures of Satisfaction with Care for Noninstitutionalized Medicare Beneficiaries, by Insurance Coverage, 1997 (2 of 2)

Community-Only Residents¹

Measure of Satisfaction ²	Total	Medicare	Supplemental Health Insurance				Medicare HMO ³
		Fee-for-Service Only	Medicaid	Individually-Purchased Private Insurance	Employer-Sponsored Private Insurance	Both Types of Private Insurance	
Beneficiaries (in 000s)	37,024	3,685	5,112	9,082	11,866	1,508	5,770
	<i>147</i>	<i>123</i>	<i>126</i>	<i>168</i>	<i>203</i>	<i>89</i>	<i>175</i>
Beneficiaries as a Percentage of Column Total⁴							
Relationship with Primary Doctor							
Information from Doctor							
Very satisfied	17.04	15.41	13.54	14.35	19.04	17.21	21.20
	<i>0.58</i>	<i>1.31</i>	<i>0.95</i>	<i>0.94</i>	<i>0.92</i>	<i>2.33</i>	<i>1.16</i>
(Very) Unsatisfied	5.08	5.84	5.27	4.82	5.20	5.06	4.57
	<i>0.24</i>	<i>0.72</i>	<i>0.71</i>	<i>0.44</i>	<i>0.46</i>	<i>1.03</i>	<i>0.51</i>
Doctor's Concern for Overall Health							
Very satisfied	18.98	16.12	13.85	17.20	20.68	22.19	23.78
	<i>0.57</i>	<i>1.42</i>	<i>0.93</i>	<i>0.87</i>	<i>0.90</i>	<i>1.93</i>	<i>1.23</i>
(Very) Unsatisfied	4.52	5.92	4.90	4.31	3.88	4.23	5.03
	<i>0.20</i>	<i>0.79</i>	<i>0.61</i>	<i>0.42</i>	<i>0.39</i>	<i>1.02</i>	<i>0.49</i>
Cost of Care							
Cost							
Very satisfied	16.46	10.22	17.01	12.29	16.88	14.50	26.12
	<i>0.48</i>	<i>0.99</i>	<i>1.06</i>	<i>0.87</i>	<i>0.72</i>	<i>1.72</i>	<i>1.16</i>
(Very) Unsatisfied	11.03	23.02	10.58	13.23	8.99	8.95	5.06
	<i>0.45</i>	<i>1.51</i>	<i>1.02</i>	<i>0.85</i>	<i>0.63</i>	<i>1.19</i>	<i>0.58</i>

Note: Standard errors are shaded and italic. See Appendix A for additional information on standard errors. See Appendix B for definitions of terms and variables.

- 1 The term *community-only residents* includes beneficiaries who resided only in the community during the year. It excludes beneficiaries who resided part of the year in the community and part of the year in a long-term care facility, and beneficiaries who resided only in a long-term care facility during the year.
- 2 Responses for sample persons not interviewed in Round 19 (i.e., the 1997 Access to Care Public Use File) were taken from their Round 16 interview (i.e., the 1996 Access to Care Public Use File) or from their Round 22 interview (i.e., the 1998 Access to Care Public Use File).
- 3 *HMO* stands for Health Maintenance Organization.
- 4 Column percentages do not sum to 100 percent because the responses of *satisfied* and *no experience* are excluded from the table for all satisfaction variables.